FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPRO | VAL | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | |
| l | Estimated average burden | | | | | | | |
| l | hours per response: | 0.5 | | | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| (Last) 2140 LAKE | ` | | | 1. Name and Address of Reporting Person* TESKE TODD J | | | | | | 2. Issuer Name and Ticker or Trading Symbol LENNOX INTERNATIONAL INC [LII] | | | | | | | | Owner | |
|--|--|--|--|--|-------------------------------------|--|---------------------------------|---|--|---|---|--|-------|--|--|---|--|------------------|--|
| | | (Last) (First) (Middle) 2140 LAKE PARK BLVD. | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/15/2019 | | | | | | | | icer (give title low) | Othe belov | r (specify v) | |
| (Street) RICHARDSON TX 75080 (City) (State) (Zip) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | ne) X Fo Fo | vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) | | | | | d Sec Ben Owr | mount of urities eficially ned Following orted | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount (A) or (D) | | Price | Trar | saction(s) tr. 3 and 4) | | (111501.4) | | |
| Common Stock, Par Value \$0.01 Per Share 04/15/2 | | | | | | | 2019 | | A ⁽¹⁾ | | 18 | | A | \$264 | 1.4 | 10,650 | D | | |
| | | Та | | | | | | | | | sed of, onvertib | | | | Owne | d | | | |
| Derivative C Security (Instr. 3) P | ative Conversion Date Execution Date, ity or Exercise (Month/Day/Year) if any | | | | ansaction of ode (Instr. Derivative | | ative rities ired osed | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | ount | 8. Price o Derivative Security (Instr. 5) | | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

Director's Quarterly Stock Compensation

Remarks:

 $Attorney\mbox{-in-fact pursuant to power of attorney dated December~8,~2017.}$

/s/ Sarah Braley, attorney-infact for Mr. Todd J. Teske 04/15/2019

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.